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| APPLICATION NO. | FILING DATE | | FIRST NAMED INVENTOR | ATT | ORNEY DOCKET NO. | CONFIRMATION NO. | |
| 10/699,573 10/31/2003 Majid Entezarian 065640-0221 1572 FITLE OF INVENTION: HIGH CAPTURE EFFICIENCY BAFFLE | | | | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | NO | \$1400 | \$0 | \$1400 | \$1400 | 11/28/2006 | |
| EXAM | INER | ART UNIT | CLASS-SUBCLASS | | | | |
| HOPKINS, ROBERT A 172 1. Change of correspondence address or indication of "Fee Add- | | 1724 | 055-320000 | | | | |
| CFR 1.363) Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE Phillips Plastics Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-2623 (enclose an extra copy of this form). | | | | | | | |
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